

### **HOW TO INTERPRET THE INSpect RX REPORT**

#### The Disclaimer

The disclaimer is the first page of every INspect Rx report. Make sure to fully review the disclaimer before making patient treatment decisions on of the basis of the report. Understand that mistakes do happen. The data contained in the report comes directly from dispensing pharmacies. Our matching system takes this into account and attempts to catch common variations on spellings. Always verify information on the report before drawing any conclusions about the patient with the dispensing pharmacy. The dispensing pharmacy is listed next to each prescription on the INspect Rx report, and the contact information can be found in the Pharmacy Key at the end of the report.

#### **Patient Keys**

Make sure to always review the Patient Key on the INspect Rx report. It is titled "Patients that match search criteria" and lists the name, date of birth and address of patients who match the information the user requested next to an ID number. Those ID numbers correspond to each record listed on the report, under the Pt ID column. Usually the listings under the Patient Key belong to one individual, but on occasion there are cases where data belonging to two individuals are mistakenly combined, creating a report that shows prescription records for both individuals. This can happen with twins, a father and son with the same name living at the same address, or individuals who have the same or similar name and date of birth (John James from Indianapolis, DOB 3/13/1981 and John James from Bloomington, DOB 3/13/1981.)

Reviewing the Patient Key will identify whether there is more than one individual listed on the report.

The INspect Rx Report is based on criteria entered by the user in the search request combined with the data submitted to us by the dispensing pharmacy.

#### Are there other Keys?

Yes, besides the Patient Key, which indicates the individual whose records appear on the report, there is a Prescriber Key that lists all the practitioners who have written the prescriptions on the report.

Similarly, there is a Pharmacy Key that indicates the dispensing facility corresponding to each prescription record.

### Prescriber Key

In most cases, a prescriber key will be an abbreviation of a practitioner's name, (e.g. JO MIC for "Michael Johnson.") In some cases, the abbreviation stands for a health network or hospital (e.g. CLA for "Clarian") which usually corresponds to instances in which a patient visited an emergency room or had a prescription written by a resident physician or physician's assistant not currently linked to an individual DEA number, and as such often writes prescriptions using the hospital's DEA number. In these situations, you can contact the dispensing pharmacy listed next to the relevant record to inquire about exactly who wrote the prescription. Be aware that some patients could have multiple prescribers listed on the report who share a common practice. If the addresses listed in the Prescriber Key are the same for more than one practitioner, they are likely practicing out of the same office location.

### **Pharmacy Key**

The dispensing pharmacy for each prescription record is listed under the Pharm column on the INspect Rx report. The seven-digit number in the Pharm column corresponds to the pharmacy facility location show in the Pharmacy Key at the end of the report. The pharmacy key displays contact information for each pharmacy referenced in the report.

If you see a DEA number in the Pharmacy Key, it means that the prescription was dispensed directly from a practitioner, not from a pharmacy. The DEA number will match that of a dispensing physician.

### Combined information on the INspect Rx Report

On occasion, an INspect Rx report will show records for more than one individual. This can happen as a result of the search criteria entered by the user, or it can happen due to the matching system used by the PMP WebCenter application. When a user enters search criteria, the system will match on the basis of (in order of priority) 1. First and last name 2. Date of birth 3. Address. Always review the Patient Key to determine whether the report is combining more than one individual's prescription history.

## What do the headings above each column on the INspect Rx report mean?

**Fill Date:** The date the prescription was filled / dispensed by the pharmacy.

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**Product, Str, Form**: Product is the name of the drug dispensed, Str is the strength of the product (usually in milligrams or milliliters) and Form indicates the physical make-up of the drug (tablet, capsule, injection).

**Qty**: The quantity of the drug prescribed.

**Days:** The number of days the dispensed quantity was intended to cover.

**Pt ID:** Stands for Patient ID, but it is not the social security or driver's license number of the patient. The Patient ID is a system assigned number that corresponds to a number in the Patient Key. The Patient Key identifies all the individual patient profiles associated with records on the report. It is important to always review the patient key to ensure that each prescription record has been correctly attributed to the patient subject of the report.

**Prescriber:** Corresponds to the practitioner who wrote the prescription. The abbreviation under the Prescriber column will match at least one of the practitioners listed in the Prescriber Key, titled "Prescribers for Prescriptions Listed."

**Written:** Corresponds to the date on which the prescription was written.

**Rx #:** Corresponds to the number the pharmacy uses internally to track that specific prescription.

**N/R:** Corresponds to whether the prescription is New, or whether it is a Refill from a previous prescription.

**Pharm:** Corresponds to the pharmacy which dispensed that prescription record. The seven-digit number will correspond to a pharmacy facility listed in the Pharmacy Key, titled "Pharmacies that dispensed prescriptions listed." The contact information for that facility will be listed in the Pharmacy Key.

Pay: Corresponds to the type of payment used for the

# Why do I get my INspect Rx report back right away sometimes, while other times it is emailed to me after a period of time?

Most patient information request are auto-filled, meaning the report information is available to users in a matter of seconds. However, in some cases a user will get a message that states:

The request could be processed because it returned too many records for the system to process automatically. You request has been submitted to the INspect Administrator for completion. Your search will be processed within 24 hours, and you will be notified. Please do not resubmit this search. Thank you for your patience.

**INspect Management Team** 

If you receive this message, your request will be processed within 24 business hours. Once processed, a notification will e sent to the user's email address indicating that the report is available for viewing. You can view the request by logging into the PMP WebCenter, clicking the Request tab, and then clicking View. What the error message means is that the system cannot correctly match records to the search criteria entered by the user, and that the INspect Administrator will need to manually fulfill the request.

This can happen when conflicting information on the requested patient exists in the database, or when records match more than one individual. Supposed there is a case of a father and son with the same name living at the same address, or a set of twins who live at the same address and share the same date of birth. In such cases, the INspect Administrator matches the request, making every attempt to include only records for the patient on who the user is requesting information.

### Can I give my patient a copy of the INspect Rx report? Isn't it a medical record?

Per the disclaimer the first page of every report, you should never fax, copy, email, mail or otherwise disseminate the INspect Rx report. It should not leave a practitioner's office.

The INspect Rx report is not a medical record; rather it is a direct reflection of medical records that exist on site at the dispensing pharmacies. The report should be viewed as a snapshot of the patient's controlled substance history at a given point in time, based on records available at the pharmacy level.

### What if a patient says the INspect Rx report is wrong and the information is falsely attributed to them?

First, review the Patient Key to ensure there is not more than one individual on the report, and that the report has not combined information on the patient with that of another individual. Secondly, confirm any prescriptions of concern by contacting the dispensing pharmacy. The dispensing pharmacy will have the hard copy record of the original prescription, and should be able to answer questions regarding the prescription. The pharmacy can also verify the patient's information for you. For example, the pharmacy may have a different address on file for the patient and/or a different spelling of the patient's name. If the patient contests the information on the report and believes that it is an error, INspect will provide that patient with a list of pharmacies who have dispensed to them. Upon receipt of that list, it is the responsibility of the patient to obtain their medical records from each dispensing pharmacy in order to determine that an error has been made at the pharmacy level. The dispensing pharmacy must then contact the INspect program and submit a Pharmacy Change Order Request to alter information previously submitted to the INspect database. Before INspect will change records, both confirmation by the qualifying pharmacist that an error was made and a duly certified Pharmacy Change Request for is needed.

### Can I share information on the INspect Rx report with other medical professionals?

You may share the information contained in the report (not the actual report) with any practitioner or provider listed on the report, who is mutually providing treatment to the patient in question. The passage of Senate Bill 356 allows practitioner to share information with Law Enforcement without fear of civil / criminal liability, and took in effect July 1, 2010.